

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: MIKE WILSON HOUSE (THE) (590061)
Address: 2409 RUDOLPH ROAD, EAU CLAIRE, WI 54701
License Status: REGULAR
Licensed/Certified/Registered 12/19/1995
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0094123 **End Date:** 02/02/2005 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006415 Served 02/12/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(5)(b)	TRAINING-8 HOURS ANNUALLY		
88.07(3)(a)	PRESCRIPTION MEDICATIONS		

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